

10/518097

PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
Fee Record Sheet

12/22/2004 SNAJARRO 00000099 192179 10518097

01 FC:1631 300.00 DA
02 FC:1632 500.00 DA
03 FC:1633 200.00 DA
04 FC:1615 150.00 DA

06/03/2005 AJOHNS02 00000005 192179 10518097

01 FC:1642 400.00 DA

02 FC:1632 500.00 CR

PTO-1556
(5/87)

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 6/3/05

2 Serial/Patent # 101518097

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing	1	<u>12/14/04</u>	\$ 100
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$

7 TOTAL AMOUNT OF REFUND \$ 100

8 TO BE REFUNDED BY:

10 REASON:

Treasury Check

Overpayment

Credit Deposit A/C #:

Duplicate Payment

19--2179

No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: A Johnson

TITLE: paralegal

SIGNATURE: A Johnson

PHONE: 308-9740

OFFICE: PCT

***** THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____

DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B